

AMBULATORY SURGICAL CENTER SURVEY REPORT

MEDICARE SUPPLIER NUMBER		FACILITY NAME AND ADDRESS (City, State, Zip Code)	
NAME OF SURVEYOR AND PROFESSIONAL TITLE			
SURVEYOR'S PROFESSIONAL TITLE			
1. <input type="checkbox"/> Initial Survey		2. <input type="checkbox"/> Resurvey	
LIST ADDITIONAL SURVEYOR'S NAMES		TITLES	

SURVEY TEAM COMPOSITION

Indicate the Number of Surveyors According to Discipline:

A.	<input type="text"/>	Administrator	H.	<input type="text"/>	Life Safety Code Specialist
B.	<input type="text"/>	Nurse	I.	<input type="text"/>	Laboratorian
C.	<input type="text"/>	Dietitian	J.	<input type="text"/>	Sanitarian
D.	<input type="text"/>	Pharmacist	K.	<input type="text"/>	Therapist
E.	<input type="text"/>	Records Administrator	L.	<input type="text"/>	Physician
F.	<input type="text"/>	Social Worker	M.	<input type="text"/>	National Institute of Mental Health
G.	<input type="text"/>	Qualified Mental Retardation Professional	N.	<input type="text"/>	Other

NOTE: More than one discipline may be marked for surveyors qualified in multiple disciplines.

Indicate the Total Number of Surveyors Onsite: _____

Q1

Name of Facility

CODE		MET	NO MET	N/A	EXPLANATORY STATEMENTS
Q2	\$416.40 Condition For Coverage: Compliance With State Licensure Law.				
	The ASC must comply with state licensure requirements.				
Q3	\$416.41 Condition For Coverage: Governing Body and Management				
	The ASC must have a governing body that assumes full legal responsibility for determining, implementing, and monitoring policies governing the ASC's total operation and for ensuring that these policies are administered so as to provide quality health care in a safe environment. When services are provided through a contract with an outside resource, the ASC must assure that these services are provided in a safe and effective manner.				
Q4	(a) Standard: Hospitalization.				
	The ASC must have an effective procedure for the immediate transfer to a hospital, of patients requiring emergency medical care beyond the capabilities of the ASC. This hospital must be a local, Medicare participating hospital or a local, non-participating hospital that meets the requirements for payment for emergency services under §482.2 of this chapter. The ASC must have a written transfer agreement with such a hospital, or all physicians performing surgery in the ASC must have admitting privileges at such a hospital.				
Q5	\$416.42 Condition for Coverage: Surgical Services.				
	Surgical procedures must be performed in a safe manner by qualified physicians who have been granted clinical privileges by the governing body of the ASC in accordance with approved policies and procedures of the ASC.				
Q6	(a) Standard: Anesthetic risk and evaluation.				
	A physician must examine the patient immediately before surgery to evaluate the risk of anesthesia and of the procedure to be performed. Before discharge from the ASC, each patient must be evaluated by a physician for proper anesthesia recovery.				

Name of Facility

CODE		MET	NO MET	N/A	EXPLANATORY STATEMENTS
Q7	<p>(b) Standard: Administration of anesthesia.</p> <p>Anesthetics must be administered by only —</p> <p>(1) A qualified anesthesiologist; or</p> <p>(2) A physician qualified to administer anesthesia, a certified registered nurse anesthetist, a supervised trainee in an approved educational program or an anesthesia assistant as defined in §410.68(b). In those cases where a nonphysician administers the anesthesia, the anesthetist must be under the supervision of the operating physician, and in the case of anesthesiologist's assistant, under the supervision of an anesthesiologist.</p>				
Q8	<p>(c) Standard: Discharge.</p> <p>All patients are discharged in the company of a responsible adult, except those exempted by the attending physician.</p>				
Q9	<p>§416.43 Condition for Coverage: Evaluation of Quality.</p> <p>The ASC, with the active participation of the medical staff, must conduct an ongoing, comprehensive self-assessment of the quality of care provided, including medical necessity of procedures performed and appropriateness of care, and use findings, when appropriate, in the revision of center policies and consideration of clinical privileges.</p>				
Q10	<p>§416.44 Condition of Coverage: Environment.</p> <p>The ASC must have a safe and sanitary environment, properly constructed, equipped, and maintained to protect the health and safety of patients.</p>				
Q11	<p>(a) Standard: Physical environment.</p> <p>The ASC must provide a functional and sanitary environment for the provision of surgical services.</p>				
Q12	<p>(1) Each operating room must be designed and equipped so that the types of surgery conducted can be performed in a manner that protects the lives and assures the physical safety of all individuals in the area.</p>				

Name of Facility

CODE		MET	NO MET	N/A	EXPLANATORY STATEMENTS
Q13	(2) The ASC must have a separate recovery room and waiting area.				
Q14	(3) The ASC must establish a program for identifying and preventing infections, maintaining a sanitary environment, and reporting the results to appropriate authorities.				
Q15	(b) Standard: Safety from fire. The ASC must meet the provisions of the Life Safety Code of the National Fire Protection Association (NFPA-1981 edition) that are applicable to ambulatory surgical centers, with the following exception. In consideration of a recommendation by the State survey agency, CMS may waive, for periods deemed appropriate, specific provisions of that code which, if rigidly applied, would result in unreasonable hardship upon an ASC, but only if the waiver will not adversely affect the health and safety of the patients.				
Q16	(c) Standard: Emergency equipment. Emergency equipment available to the operating rooms must include at least the following:				
Q17	(1) Yes (2) No				
	(1) Emergency call system.				
	(2) Oxygen.				
	(3) Mechanical ventilatory assistance equipment including airways, manual breathing bag, and ventilator.				
	(4) Cardiac defibrillator.				
	(5) Cardiac monitoring equipment.				
	(6) Tracheostomy set.				
	(7) Laryngoscopes and endotracheal tubes.				
	(8) Suction equipment.				
	(9) Emergency medical equipment and supplies specified by the medical staff.				

Name of Facility

CODE		MET	NO MET	N/A	EXPLANATORY STATEMENTS
Q18	(d) Standard: Emergency personnel. Personnel trained in the use of emergency equipment and in cardiopulmonary resuscitation must be available whenever there is a patient in the ASC.				
Q19	\$416.45 Condition for Coverage: Medical Staff. The medical staff of the ASC must be accountable to the governing body.				
Q20	(a) Standard: Membership and clinical privileges. Members of the medical staff must be legally and professionally qualified for the positions to which they are appointed and for the performance of privileges granted. The ASC grants privileges in accordance with recommendations from qualified medical personnel.				
Q21	(b) Standard: Reappraisals. Medical staff privileges must be periodically reappraised by the ASC. The scope of procedures performed in the ASC must be periodically reviewed and amended as appropriate.				
Q22	(c) Standard: Other practitioners. If the ASC assigns patient care responsibilities to practitioners other than physicians, it must have established policies and procedures, approved by governing body, for overseeing and evaluating their clinical activities.				
Q23	\$416.46 Condition for Coverage: Nursing Services. The nursing services of ASC must be directed and staffed to assure that the nursing needs of all patients are met.				
Q24	(a) Standard: Organization and staffing. Patient care responsibilities must be delineated for all nursing and service personnel. Nursing services must be provided in accordance with recognized standards of practice. There must be a registered nurse available for emergency treatment whenever there is a patient in the ASC.				
Q25	\$416.47 Condition for Coverage: Medical Records. The ASC must maintain complete, comprehensive, and accurate medical records to ensure adequate patient care.				

Name of Facility

CODE		MET	NO MET	N/A	EXPLANATORY STATEMENTS
Q26	(a) Standard: Organization. The ASC must develop and maintain a system for the proper collection, storage, and use of patient records.				
Q27	(b) Standard: Form and content of record. The ASC must maintain a medical record for each patient. Every record must be accurate, legible, and promptly completed. Medical records must include at least the following:				
Q28	(1) Yes (2) No				
	(1) Patient identification.				
	(2) Significant medical history and results of physical examination.				
	(3) Pre-operative diagnostic studies (entered before surgery), if performed.				
	(4) Findings and techniques of the operation, including a pathologist's report on all tissues removed during surgery, except those exempted by the governing body.				
	(5) Any allergies and abnormal drug reactions.				
	(6) Entries related to anesthesia administration.				
	(7) Documentation of properly executed informed patient consent.				
	(8) Discharge diagnosis.				
Q29	\$416.48 Condition for Coverage: Pharmaceutical Services. The ASC must provide drugs and biologicals in a safe and effective manner, in accordance with accepted professional practice, and under the direction of an individual designated responsible for pharmaceutical services.				

Name of Facility

CODE		MET	NO MET	N/A	EXPLANATORY STATEMENTS
Q30	(a) Standard: Administration of drugs. Drugs must be prepared and administered according to established policies and acceptable standards of practice.				
Q31	(1) Adverse reactions must be reported to the physician responsible for the patient and must be documented in the record.				
Q32	(2) Blood and blood products must be administered by only physicians or registered nurses.				
Q33	(3) Orders given orally for drugs and biologicals must be followed by a written order, signed by the prescribing physician.				
Q34	\$416.49 Condition for Coverage: Laboratory and Radiologic Services. The ASC must have procedures for obtaining routine and emergency laboratory and radiologic services, from Medicare approved facilities, to meet the needs of patients.				

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0266. The time required to complete this information collection is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to CMS, 7500 Security Boulevard, N2-14-26, Baltimore, Maryland 21244-1850.